

PART B

E TRANSMITTAL

242-660 #2d
501-3 R2-11

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1. CORRESPONDENCE ADDRESS

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18M1/0903

DEC - 3 1997

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and Zip Code

CO-INVENTOR'S NAME

Street Address

City, State and Zip Code

 Check if additional changes are enclosed

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/380,857	01/30/95	009	JOHNSON, N	1806 09/03/97
First Named Applicant HARDY, BRITTA				

**TITLE OF
INVENTION** IMMUNO-STIMULATORY MONOClonal ANTIBODIES

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1 22671	424-153.100	R18	UTILITY	YES	\$645.00	12/03/97

3. Correspondence address change (Complete only if there is a change)

12/19/1997 LBERGER 00000128 08380857
01 FC:242 660.00 OP
02 FC:561 30.00 OP

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Gary M. Nath

2 Suet M. Chong

3 Nath & Associates

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

MOR RESEARCH APPLICATIONS LTD.

(2) ADDRESS: (CITY & STATE OR COUNTRY)

Israel

6a. The following fees are enclosed:

 Issue Fee Advance Order - # of Copies 10

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 Issue Fee Advance Order - # of Copies Any Deficiencies in Enclosed FeesThe COMMISSIONER OF PATENTS AND TRADEMARKS is
requested to apply the Issue Fee to the application identified above.

(Authorized Signatures) (Date) 12/03/97

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